

A photograph of a winter forest scene. In the foreground, a calm body of water reflects the surrounding trees and the sky. The trees are mostly bare, with some snow on their branches and the ground. The reflection in the water is clear, showing the intricate patterns of the tree branches. The overall tone is serene and quiet.

Carl Vinson VA Medical Center

VINSON VOICE

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To care for him who shall have borne the battle and for his widow, and his orphan . . .

President Abraham Lincoln, 2nd Inaugural Address

Mission . . . To improve the health status of Veterans . . .

Vision . . . To be the provider of choice for Veterans . . .



VA's Top Doctor Named Among Top 20 Most Influential People in Healthcare

Dr. Carolyn Clancy selected by *Modern Healthcare* magazine from reader and editor recommendations

Modern Healthcare recently ranked Dr. Carolyn M. Clancy, the Department of Veterans Affairs' (VA) Interim Under Secretary for Health, as number 19 in its annual "100 Most Influential People in Healthcare" poll. Dr. Clancy has appeared on the publication's notable list for 11 straight years.

"This is a well-deserved recognition of Dr. Clancy's expertise, knowledge, judgment and informed approach to developing and implementing new initiatives here at VA," said VA Secretary Robert McDonald. "As anyone who knows and works with Dr. Clancy can attest, she is a person of enormous integrity, tireless work ethic and a deep love and respect for Veterans. As VA undergoes a transformation focused on delivering the best outcomes for patients, Dr. Clancy brings a dedication to quality and safety that is exemplary."

As Interim Under Secretary for Health at VA, Dr. Clancy oversees the Veterans Health Administration (VHA), the Nation's largest integrated healthcare system. VHA provides care for millions of Veterans at 1,700 hospitals, clinics, long-term care facilities and Readjustment Counseling Centers.

Dr. Clancy most recently joined VA Secretary Robert A. McDonald in launching VA's [Blueprint for Excellence](#). The Blueprint outlines the steps VA will be taking to improve performance, promote a positive culture of service, advance healthcare innovation for Veterans and the country and increase access to care and accountability.

Prior to assuming the duties of the Interim Under Secretary for Health, Dr. Clancy joined VA in August of 2013 as Assistant Deputy Under Secretary for Health, for Quality, Safety and Value, where she served as the Chief Quality Management Officer for VHA. A general internist and health services researcher, Dr. Clancy is a graduate of Boston College and the University of Massachusetts Medical School. Dr. Clancy holds an academic appointment at George Washington University School of Medicine (Clinical Associate Professor, Department of Medicine) and serves as Senior Associate Editor, Health Services Research and is a member of numerous health-related editorial boards. A link to Dr. Clancy's complete biography and career highlights can be found [here](#). •



Ebola

Signs and Symptoms

Ebola is spread through direct contact with blood or bodily fluids of a person who is sick with Ebola.



A person infected with Ebola can't spread the disease until symptoms appear.

If you have traveled to an area with an Ebola outbreak or had close contact with a person sick with Ebola, call and talk to your health care provider.

Symptoms can appear from 2 to 21 (mostly 8 to 10) days after exposure:

- **Fever (100.4°F or higher)**
- **Severe headache**
- **Weakness**
- **Muscle pain**
- **Diarrhea**
- **Vomiting**
- **Stomach pain**
- **Bleeding or bruising**



www.publichealth.va.gov/InfectionDontPassItOn

October 2014

VA



U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Public Health

VA's Blueprint for Excellence

Strategies for More Veteran-Centric Care

Megan Moloney

To care for him who shall have borne the battle, and for his widow and his orphan.

These words from President Abraham Lincoln's second inaugural address guide the mission of today's VA.

Over the last two months, VA's secretary, Bob McDonald, has been traveling throughout the U.S. listening to Veterans and discussing with them the issues that VA is facing.

"The problems we face are serious," Sec. McDonald acknowledges. "The President, Congress, Veterans service organizations, taxpayers, and VA's rank and file all understand the need for immediate reforms to achieve three non-negotiable goals—goals we set for ourselves more than two months ago on our 'Road to Veterans Day.'"

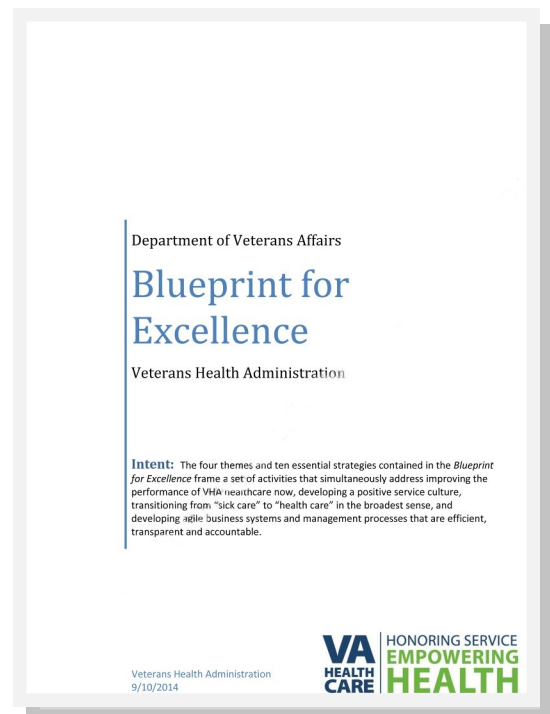
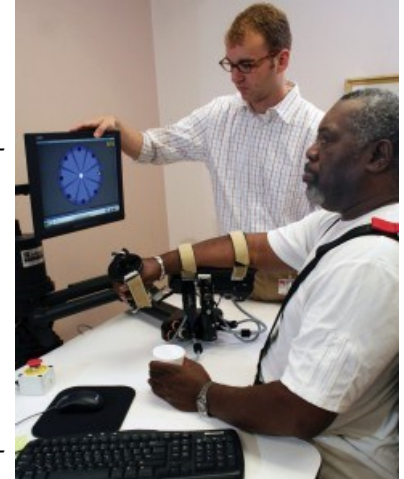


With Veterans Day just one week away, VA continues to work towards those goals and to better serve and care for those who have "borne the battle."

Earlier this fall, the Veterans Health Administration released its Blueprint for Excellence, an important step in VA's transformation.

"This blueprint is critical to achieving part three of our Road to Veterans Day initiative—setting a course for long-term excellence and reform," Sec. McDonald told the annual meeting of the Institute of Medicine. "It is VA's template to re-establish the department's preeminence and leadership in American healthcare."

Read the Blueprint for Excellence and the Secretary's remarks to the Institute of Medicine for more on what VA is doing to set its course for the future. •



Click the image to review the Blueprint for Excellence.



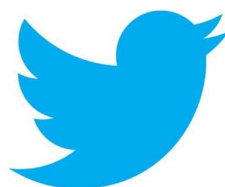
Join Us!



We're committed to communicating effectively with our Veterans and other stakeholders, and the Internet and social media are a few of the ways that we do that. Our Internet and Twitter sites and our Facebook page offer news, events, stories, historical tidbits, and other useful information to keep you informed of what's happening in VA and our medical center.



To find us on the Internet, just search for "Dublin VA Medical Center" or go directly to www.dublin.va.gov. Our Facebook page is available by searching for "Dublin VA Medical Center" as is our Twitter site.



Once you access us on Facebook and Twitter, be sure to follow us and "like" what you see, and on our Internet site opening page, look to the right and enter your email address, then confirm it, and you will receive automatic updates when we post new info.



Once you have joined us on the Internet and our social media pages, refer us to other Veterans and Veteran supporters and anyone with an interest in Veterans' needs. The more we share this important information, the more Veterans we will reach and serve. With all of our communications, the best way to get the word out is still through word of mouth from other Veterans and their supporters, so help us get the info out there!

If you have any questions or need any assistance with getting on our Internet site or social media, just contact Dr. Frank G. Jordan Jr. at Frank.Jordan@va.gov or at 478-274-5440, and be sure to share your suggestions about how we can communicate more effectively with our Veterans and other stakeholders.

Thank you in advance for helping us get out the word about VA programs and services, and thank you for serving our great nation!

Identity Theft Prevention Resources for Veterans

With technology becoming more ingrained in our lives each year, our information is more accessible than ever. If it's not properly protected, criminals can access it and wreak havoc on our financial and personal well-being.

Veterans are not immune to these threats, but there are ways to make it harder for cyber criminals to steal your identity. Research has shown that education is one of the key deterrents of identity theft—meaning that those who are aware of the common causes of identity theft and the best ways to stop them are much less likely to end up as victims.

VA is making a push to give Veterans the knowledge they need to keep identity thieves at bay.

In August, VA announced the launch of the second phase of an identity theft prevention campaign titled *More Than a Number*, which aims to educate Veterans and their beneficiaries on identity theft prevention. (The first phase, launched in 2011, was aimed at educating VA employees on the importance of safeguarding Veteran information.) The campaign, spearheaded by the Identity Safety Service within the Office of Information Security (OIS), has debuted two new resources that are now available—an informa-

tional website (www.va.gov/identitytheft) and a toll-free help line (1-855-578-5492). The help line will be open Monday through Friday, from 8 a.m. to 8 p.m. ET, with voicemail for after-hours calls.

"We recognize that for Veterans, as for all Americans, in this new digital age, identity theft is a growing concern," said Stephen Warren, VA's Chief Information Officer. "Our goal is to help educate and protect those who have protected this great country."

The *More Than a Number* website houses identity theft prevention tips, next steps for identity theft victims, interactive media, and links to the best resources.



What is Home Telehealth? "Right Care, Right Place, Right Time"

December is Telehealth month. Home Telehealth falls under the umbrella of Telehealth. With the utilization of Home Telehealth, Veterans are able to increase access to health care, improve health care outcomes, reduce clinic visits, improve satisfaction for the Veteran and Provider, and promote self-management. Veterans use Telehealth equipment such as a Health Buddy, a cell modem, a personal cell phone, or the internet. As of May of 2013, over 80,000 Veterans have participated in the Home Telehealth program.

The Home Telehealth program nurses are called Care Coordinators. A Care Coordinator is involved in an ongoing assessment, monitoring, and case management for the Veteran. The Care Coordinator works in collaboration with the PACT. This improves patient outcomes, raises work efficiency and enhances management of chronic disease by allowing the Care Coordinator to collaborate with the Veteran and their health care team. How does the Care Coordinator do that? Care Coordinators have specific training and competency in the utilization of disease management, healthcare informatics and Telehealth technologies.

Our Dublin VA Home Telehealth Care Coordinators monitor Veterans with the following chronic diseases: diabetes, hypertension, hypertension/hyperlipidemia, congestive heart failure, COPD, depression and recently implemented weight management.

If you think your outpatient Veteran may benefit from Home Telehealth, have the PACT place a consult for Care Coordination Home Telehealth or call your Home Telehealth Care Coordinator. Care Coordinators are here to assist in improving the health of our Veterans. So give them a call at extension 2330 or 2323. •



Incivility and Gossip are forms of **WORKPLACE VIOLENCE**. Are you part of the problem?



INCIVILITY includes behaviors intended to show disrespect, such as taking credit for another's work, passing blame for your own mistakes, talking down to others, making demeaning or derogatory remarks, withholding information, acting irritated when someone asks for a favor and shutting someone out of a network or team.

GOSSIP is any language that would cause a person harm, pain, or confusion and is used outside of the presence of the person for whom the harm is intended.

Workplace gossip is **UNPRODUCTIVE**. It breeds resentment and becomes a roadblock to effective communication and collaboration.

Gossip is a common self-defense mechanism used by cowards. It is a fear-based behavior that **COMPROMISES ONE'S INTEGRITY**.

Unintended Results

Incivility and Gossip can lead to physical and mental health ailments resulting in increased employee absences.

Incivility and Gossip break down the trust level within the group, which results in employees second-guessing each other. Gossip is the death of teamwork as the group breaks up into cliques and employees start refusing to work with others.

If left unmanaged, **Incivility and Gossip** can lead to the loss of good employees



Repercussions



Incivility and Gossip can hurt your professional reputation and negatively impact your career.

Incivility and Gossip can impact your licensure and/or credentials based on the codes of ethics in some professions.

When **Incivility and Gossip** in the workplace interfere with the organization's ability to do business and uphold its mission, the issue of employee conduct can be raised and the offender may be subject to disciplinary action up to and including removal.

Be The Solution

GET OUT OF THE GOSSIP PIPELINE HERE'S HOW:

- ♦ **Be busy.** Gossipmongers want attention. If you're preoccupied with your work, you can't be available to listen to their latest story.
- ♦ Don't participate. Walk away from the story. Don't give visual clues that you are interested in listening. If someone passes a juicy story on to you, don't pass it any further. **Take personal responsibility to act with integrity.**
- ♦ Turn it around by saying something positive. It isn't nearly as much fun to spread negative news if it's spoiled by a complimentary phrase about the person being attacked.
- ♦ **Avoid the gossip.** If you notice one person who consistently makes trouble, take the necessary actions to have as little interaction with that person as possible. Avoid him/her.
- ♦ Keep your private life private. **Remember, if they are gossiping about others, they may gossip about you.**
- ♦ Choose your friends wisely at work. You spend a good deal of time at work so it's natural for friendships to develop. Share information sparingly until you are sure that you have built up a level of trust. **Also, close association with gossipers will give the perception that you are a gossip.** Protect your reputation!
- ♦ **Be direct.** If you confront the gossip and confidently tell him or her that such behavior is making it uncomfortable for you and other coworkers, it's likely it will stop.
- ♦ Don't be afraid to go to a superior. Gossiping wastes a lot of time and hurts morale. Carl Vinson VAMC is committed to creating a healthy work environment and wants the opportunity to correct this type of situation.

Other Options



- ♦ Get help from your Manager or Supervisor
- ♦ Participate in mediation (ADR) to help resolve workplace disputes.
Audrey Andrews, Extension 2450
- ♦ Contact a Union representative
Extension 2557
- ♦ Contact the EEO Program Manager
Audrey Andrews, Extension 2450
- ♦ Contact the Employee Assistance Program (EAP) - (478) 272-1190

A MESSAGE FROM THE SECRETARY

An Open Letter to America's Veterans

At the Department of Veterans Affairs (VA), we have one of the most noble and inspiring missions in Government. I accepted this job and joined this mission to better serve you—our Veterans—and improve the delivery of the care and benefits you have earned. It is our privilege to serve you, and I have made clear that as we move forward as a Department, we will judge the success of all our efforts against a single metric—the outcomes we provide for Veterans.

The Veterans Access, Choice, and Accountability Act of 2014 (VACAA), enacted less than 3-months ago, goes a long way toward enabling VA to meet the demand for Veterans health care in the short-term. VA has put considerable focus and attention on ensuring the law is implemented seamlessly, without confusion, and without creating hardships for Veterans. This legislation provides authorities, funding, and other tools to better serve Veterans in the short-term. We are appreciative of this temporary measure to improve access while we build capacity within the VA system to better serve those who rely on us for health care.

From June 1 to September 30, 2014, VA completed more than 19 million Veteran appointments in our facilities and made nearly 1.1 million authorizations for Veterans to receive care in the private sector and other non-VA health facilities—a 46.6-percent increase over the same period in 2013. This was all done under existing programs prior to the passage of VACAA, and sets the stage for strengthening existing partnerships between VA and the private sector. We have much we can share with one another to the benefit of Veterans.

VA has signed contracts with two private health care companies to help VA administer the Veterans Choice Program (Choice Program) under VACAA. The Choice Program is a new, temporary benefit allowing some Veterans to receive health care in their communities rather than waiting for a VA appointment or traveling to a VA facility. It does not impact your existing VA health care or any other VA benefit you may be receiving. We will begin implementing this benefit on November 5, as required by law. A call center is now operational to answer your questions and verify your eligibility for this program.

As part of this new program, we are issuing a Veterans *Choice Card* to every Veteran who is potentially eligible for the new, temporary health benefit. The *Choice Card* allows Veterans to elect to receive care outside of VA when they qualify for the new program based on the distance of their residence from a VA care facility, or when wait times for VA health care exceed the standards established in law. The *Choice Card* does not replace the identification card you already use to access other VA benefits; please do not throw away that identification card.

The *Choice Card* will be issued in three phases. The first group of *Choice Cards* along with a letter explaining eligibility for this program is currently being sent to Veterans who may live more than 40 miles from a VA facility. The next group of *Choice Cards* and letters will be sent shortly thereafter to those Veterans who are currently waiting for an appointment longer than 30-days from their preferred date or the date determined to be medically necessary by their physician.

The final group of *Choice Cards* and letters will be sent between December 2014 and January 2015 to the remainder of all Veterans enrolled for VA health care who may be eligible for the Choice Program in the future.

We are continuing to work with our partners—Congress, Veterans Service Organizations, and others—to get the information about this health program out to Veterans in as many ways as possible. Please visit our Web site at www.va.gov/opa/choiceact where we have provided helpful information on Choice Program eligibility. We will work with our partners to keep you informed as we improve our delivery of high-quality, timely care.

Thank you for your service and sacrifice.

Sincerely,

A handwritten signature in black ink that reads "Robert A. McDonald". The signature is fluid and cursive, with the first name "Robert" and last name "McDonald" clearly legible.

Robert A. McDonald

A graphic consisting of a white rectangular box with a thick blue border. Inside the box, the words "HONORING SERVICE", "EMPOWERING", and "HEALTH" are stacked vertically. "HONORING SERVICE" is in a smaller, blue, sans-serif font. "EMPOWERING" and "HEALTH" are in a larger, bold, green, sans-serif font.

Patient Safety

Want to Make a Difference at Work?

ePER Reporting and RCAs, Part II

Yvonne Geyer, Patient Safety

Reporting patient adverse events is a crucial step in process improvement.

What is an adverse Event?

In October's edition of the Vinson Voice, we discussed the ePER reporting process which included defining a patient adverse event as an incident that fails to promote a patient's welfare or interests. Examples would include falls, missing patients, medication errors, assaults, accidents, safety issues, and privacy violations.

What can I do?

Staff can submit an electronic report for patient adverse events whenever they become aware of an incident. They can do this using the electronic Patient Event Reporting system icon on their computer desktop. This takes about 4 minutes to complete.

What is a Root Cause Analysis (RCA)?

An RCA is a process for identifying the

basic or contributing causal factors that underlie variations in performance associated with adverse events or close calls.

An RCA is a specific type of focused review that is used for analyzing patient safety events. RCA's use fact finding, interviews, policy review, and flow charts to determine what processes involved in an incident need to be implemented or improved. Action plans are developed from this analysis and implemented within the facility.

The "Missing or Absent Patient" icon on your desktop is the direct result from an RCA that determined most staff did not know the policy on missing or absent patients and could not quickly identify the steps needed to be taken in an emergency.

RCAs are important to our facility's Culture of Safety and our staff knowing when they report an event it could directly impact future policies, procedures, and practices. •

www.dublin.va.gov



Are you a Veteran who wants to improve your health through exercise and weight control? We can help! Just contact us about the MOVE program.

MOVE Coordinator Beth Wilkins
478-272-1210 ext. 2389
Elizabeth.Wilkins@va.gov



Dublin VA Medical Center



Click the image to see a video about VA's MOVE! program!

Strategic Plan Outlines VA's top Priorities

VA's Strategic Plan incorporates VA's three top priority goals, which are to improve Veteran access to VA benefits and services, eliminate the disability claims backlog and eliminate Veteran homelessness.

The Strategic Plan also outlines longer-term goals and objectives that place a strong emphasis on defining success by Veteran outcomes; enhancing the quality of and access to benefits and services through integration within VA and with our partners; and developing our workforce with the skills, tools, and leadership to meet our clients' needs and expectations.

The three Strategic Goals are:

- Empower Veterans to Improve Their Well-being
- Enhance and Develop Trusted Partnerships
- Manage and Improve VA Operations to Deliver Seamless and Integrated Support

The Strategic Plan puts an emphasis on putting the Veteran in control of how, when, and where they wish to be served. And it continues to transform VA into a 21st century organization to better serve our clients.

In addition, the Strategic Plan also highlights the VA Core Values and Characteristics. VA's five core values underscore the obligations inherent in VA's mission: Integrity, Commitment, Advocacy, Respect, and Excellence. The core values define "who we are," our culture, and how we care for Veterans and eligible beneficiaries.

Our values are more than just words – they affect outcomes in our daily interactions with Veterans and eligible beneficiaries and with each other.

Taking the first letter of each word—Integrity, Commitment, Advocacy, Respect, Excellence—creates a powerful acronym, "I CARE," that reminds each VA employee of the importance of their

role in this Department.

These core values come together as five promises we make as individuals and as an organization to those we serve. VA's core characteristics define "what we stand for," and help guide how we will perform our mission.

VA's most recent FY2014-2020 Strategic Plan is available online at www.va.gov/performance.

The Secretary said ...

Strategic Plan:

"Our Strategic Plan says it plainly: 'VA is a customer-service organization. We serve Veterans.' And it's by how well we serve them that Veterans ultimately decide our value as an organization. The truth of the matter is that we've failed in a number of ways. We need to do better. Much better.

Right now, it's up to the Department to reaffirm its worth and regain Veterans' trust. Over the past months, we've been forced to take a hard look at ourselves through their eyes, and through their experiences – good, bad and indifferent.

I think one of the lessons learned is that, if we are to be truly Veteran-focused, we need to continuously measure our performance – not just when things go wrong, but also when things go right. It's a 24-hour, 7-days-a-week, 365 days-a-year job. And that's what we intend to do.

From here on out, we want Veterans to know that when they walk through VA's doors, employees are "all in" when it comes to

meeting our mission ... "living" our values ... and keeping Veterans first and foremost in all that they do. Without that, there can be no trust.



Bob McDonald

I CARE:

"On my first day as Secretary, I asked all VA employees to join me in reaffirming our commitment to these core values. And I've directed VA leaders to do the same with the people who work for them.

As we tackle VA's specific problems, our values help cultivate a climate where everyone understands what the right thing is – and then does it. Said another way, VA's way of doing business must conform to how we expect employees to treat Veterans ... and how we expect employees to treat one another.

Those expectations extend to how people behave on-the-job, as well as how they behave when they think no one is looking."

Superior Customer Service

Disagreeing Without Being Disagreeable

Greg Swars, CVVAMC Customer Service Instructor

Vigorous, constructive debate about work-related issues is healthy for organizations and increasing the chances of achieving excellence, but to debate effectively without alienating others takes skill.

Despite what many people seem to think, workplace conflicts are *not* a bad thing, depending on how they are handled. Growth and achieving excellence cannot be achieved without a certain amount of discussion, debate, and even contention. Teams that blithely walk together down the “primrose path” without being candid about needed changes and possibilities not only fail to be their best, they often find themselves foundering. Teams need constructive examination of processes and policies on a regular basis to ensure efficient and effective operations. The problems start when we don’t handle such interactions in a constructive manner.

Too often, people find themselves allowing their emotions and personalities to get into the way when addressing work-related issues. It’s easy to understand why this happens. When you feel passionate about what you are saying or a point of view that you have taken, you want to communicate your opinions so that others will understand you, yet, when you allow emotions,

especially anger and resentment, to guide your responses, you not only risk having your opinions misunderstood and ignored or discounted, you also risk ruining interpersonal relationships that crucial for organizational success. To be successful, you must make certain that your message is received in the spirit that it is meant,

which should always be to improve quality and meet customers expectations. So how do you do it?

First, always make constructive interactions based on mutual respect and civility your goal. No matter what you are contending or proposing, if you destroy valuable relationships in the process, you have

virtually always lost something more important than anything that you have achieved. When making your point, always preserve the dignity and self-respect of the people that you are interacting with.

Also, make sure that you are not arguing for the sake of argument. Too many people use business interactions as a way of jibing people that they don’t like for personal reasons. This is always inappropriate and counterproductive. Other people simply have to be heard. No matter what the discussion, if they aren’t adding something, whether important or not, they want to speak, and such impulses can needlessly lead to irritation on the part of listeners and possible miscommunications. If it is important, discuss it, and if not, don’t. But always show respect to



those you are interacting with and accept that they may, often justifiably, take a different viewpoint.

Next, assess whether the forum is appropriate for stating your views. Sometimes, the issue may be relevant and important but the time or place may not be right. Sometimes the discussion may need to be had in a smaller group, emotions may be running high, the issue may be too sensitive for immediate discussion, or additional research may be needed before talking about the topic. Sometimes it is better to wait, especially when the setting is emotional. The best advice in this case is to leave the situation alone for a period until everyone has had a chance to cool down and be more rational. This is particularly important when communicating by email. Unfortunately, too many people feel emboldened to write things that they likely would never say if speaking with the other person, things that they often regret. It is easy to zing someone on email but, once sent, it can't be undone. If you feel the need to respond impolitely on email, write the email, save it, take a 30 minute walk, and then re-read it. In most cases, you'll realize that sending it is not a good idea and you'll take a more measured approach. In all cases, make sure that the time, place, and method are right. Don't send an email when a phone call or visit is clearly necessary.

Always take the high road. It is easy to respond in kind when someone is being rude or abrasive, but when things break down into an argument, everyone loses. Relationships can crumble, customers can lose faith, and the organization will suffer. No matter what you encounter from others, remember that *you are the professional*. You can't control others' behavior but you can always control your own, and by setting the professional example, you may just influence others to better behavior. Commit yourself to exemplary performance and professional behavior and you can at last feel good about your own conduct.

Don't take the bait! People who are determined to argue rather than discuss will use whatever technique they think will work to get you to

respond negatively. Remember *damp it, don't amp it*. No one can argue with themselves so if you maintain your equanimity and remain calm, they will either abandon their efforts to argue or may actually decide to engage in a reasonable discussion. Again, regardless of the other person's conduct, be responsible and make sure that your demeanor is always professional and civil.

Seek a mediator. Sometimes things get so out-of-hand that the relationship seems irretrievably broken and not amenable to correction. This is almost never the case. If the tension is so profound that you can't work it out, suggest a mediator to help get the conversation—and the relationship—back on track. You can ask a senior manager, a mutual friend or colleague, or some other trustworthy and level-headed person to help. If necessary, ask your EEO program manager for suggestions. No matter what it takes, never let the relationship wither. It is always a good idea to get things back on track.

Finally, swallow your pride. It is easy to indulge hurt feelings and wounded pride until you don't even remember exactly what started the problems to begin with. Don't let this happen. Ask yourself what is more important, having effective relationships that contribute to a less stressful, more productive workplace, or nurturing unhealthy grievances that lead to disruption and additional stress in an already stress full world. The most powerful skill that you can develop as a professional VA healthcare professional is to be the one to attempt to repair broken relationships. Though there is not a lot of "crossing the aisle" going on in some places these days, you can be the one to do so in your personal relationships.

Ultimately, maintaining constructive, productive relationships is one of the best things that you can do for your team and for your Veterans and other customers, and if you consider yourself a professional, acquiring and cherishing effective interpersonal skills will stand as the hallmark of your professional accomplishments. •

What You Need to Know about Ebola

The 2014 Ebola epidemic is the largest in history

The outbreak is affecting multiple countries in West Africa and CDC has confirmed the **first travel-associated case of Ebola to be diagnosed in the United States**. About half the people who have gotten Ebola in this outbreak have died.

Although the risk of Ebola spreading in the United States is very low, CDC and its partners are taking actions to prevent this from happening.



A person infected with Ebola can't spread the disease until symptoms appear

The time from exposure to when signs or symptoms of the disease appear (the incubation period) is 2 to 21 days, but the average time is 8 to 10 days. Signs of Ebola include fever (higher than 101.5°F) and symptoms like severe headache, muscle pain, vomiting, diarrhea, stomach pain, or unexplained bleeding or bruising.

Ebola is spread through direct contact with blood and body fluids

Ebola is spread through **direct contact** (through broken skin or mucous membranes) with

- Blood and body fluids (like urine, feces, saliva, vomit, sweat, and semen) of a person who is sick with Ebola.
- Objects (like needles) that have been contaminated with the blood or body fluids of a person sick with Ebola.

Ebola is **not** spread through the air, water, or food.

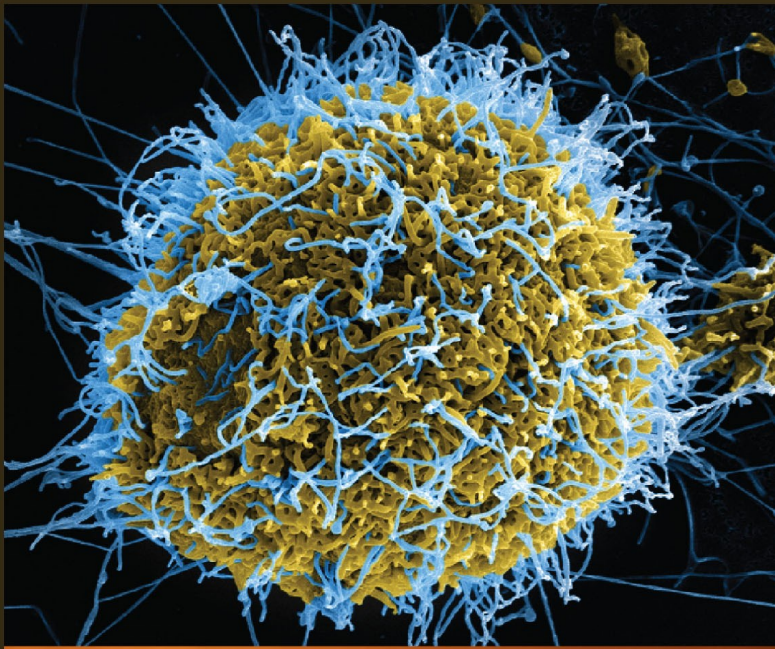
Protect yourself against Ebola

There is no FDA-approved vaccine available for Ebola. Experimental vaccines and treatments for Ebola are under development, but they have not yet been fully tested for safety or effectiveness.

To protect yourself from Ebola

- **DO** wash your hands often with soap and water or use an alcohol-based hand sanitizer.
- Do **NOT** touch the blood or body fluids (like urine, feces, saliva, vomit, sweat, and semen) of people who are sick.
- Do **NOT** handle items that may have come in contact with a sick person's blood or body fluids, like clothes, bedding, needles, or medical equipment.
- Do **NOT** touch the body of someone who has died of Ebola.





“We recognize that even a single case of Ebola in the United States seems threatening, but the simple truth is that we do know how to stop the spread of Ebola between people.” – Beth Bell, MD, MPH, Director of the National Center for Emerging and Zoonotic Infectious Diseases

What to do if you are exposed to Ebola

If you have traveled to an area with an Ebola outbreak or had close contact with a person sick with Ebola, you may be at risk if you

- Had direct contact with blood or body fluids or items that came into contact with blood or body fluids from a person with Ebola.
- Touched bats or nonhuman primates (like apes or monkeys) or blood, fluids, or raw meat prepared from these animals.
- Went into hospitals where Ebola patients were being treated and had close contact with the patients.
- Touched the body of a person who died of Ebola.

You should check for signs and symptoms of Ebola for 21 days

- Take your temperature every morning and evening.
- Watch for other Ebola symptoms, like severe headache, muscle pain, vomiting, diarrhea, stomach pain, or unexplained bleeding or bruising.
- Call your doctor even if you do not have symptoms. The doctor can evaluate your exposure level and any symptoms and consult with public health authorities to determine if actions are needed.

During the time that you are watching for signs and symptoms, you can continue your normal activities, including going to work.

If you get sick after you come back from an area with an Ebola outbreak

- Get medical care right away if you have a fever (higher than 101.5°F), severe headache, muscle pain, vomiting, diarrhea, stomach pain, or unexplained bruising or bleeding.
- Tell your doctor about your recent travel to West Africa or contact with a person who was sick with Ebola and your symptoms **BEFORE** you go to the doctor's office or emergency room. Calling before you go to your doctor's office or emergency room will help the doctor or emergency room care for you and protect other people who may be in the office or emergency room.

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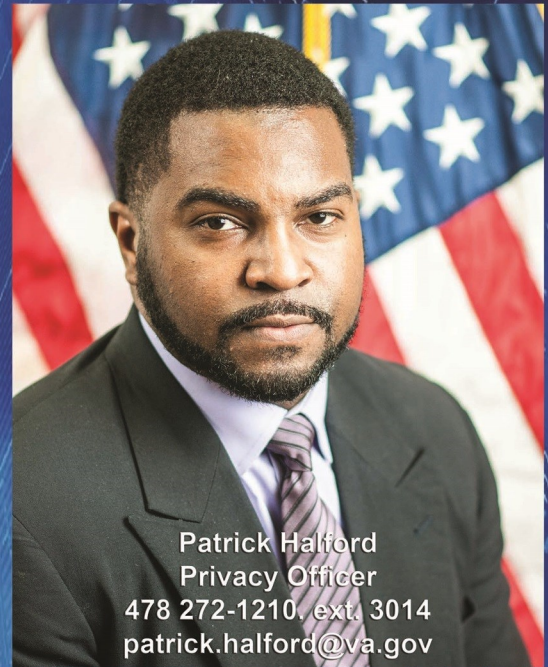
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What Will Children Remember? This One is for Amelia (Millie) Wilkins

Chaplain David Julian

I have always been a fan of Erma Bombeck's writing because her words landed so close to home, and maybe – to close to my home, and maybe too close to yours. "When the Good Lord was creating mothers, He was into His sixth day of "overtime" when the angel appeared and said. "You're doing a lot of fiddling around on this one." And God said, "Have you read the specs on this order?" She has to be completely washable, but not plastic. Have 180 moveable parts...all replaceable. Run on black coffee and leftovers. Have a lap that disappears when she stands up. A kiss that can cure anything from a broken leg to a disappointed love affair. And six pairs of hands." This would describe Elizabeth Wilkins and her daughter, "Millie."

Amelia meaning, "Industrious." I have had the privilege on several occasions to be in her presence and she is so cute, energetic, and full of curiosity that she will steal the show and then your heart! It really is timeless the things that a child says and how so often something simple touches you down deep where memories are stored. Elizabeth has told me a lot of stories about her daughter, but no one story more moved me than her visit to the Vietnam Wall we recently welcomed at the Carl Vinson VA Medical Center.

Elizabeth wanted to take her 2-year-old daughter to see the "Vietnam Wall," because she felt it important to begin conveying values that she felt like Millie should learn. Okay, Millie, "when we see the "Wall," we need to be respectful and quiet because these were men and women who died for our freedom and our country the United State of America. Little Millie smiled at her mother as she pulled into the VA and said, "This is Mama's House," that is what a 2-year-old knows about where her mother works. As she entered the entrance tent she told one of the Veterans volunteering that she needed to see that important—Wall!

Upon greeting a Korean Veteran sitting in a wheel chair just inside the entrance tent, she reached her little hand out after playing peek-a-boo with him and said, "thank you for your service." It brought the Veteran to tears! Children do learn and listen even when we think they are not. As she turned and saw all the flags representing the branches of the service she and they probably looked like sequoia trees to her little eyes, but when she got to the U.S. flag she stopped dead in her tracks and crossed her heart with her little

eyes, but when she got to the U.S. flag she stopped dead in her tracks and crossed her heart with her little hand.

As you remember it was a very hot day but Millie didn't seem to mind. She held Elizabeth's hand as she entered in front of the sea of names of those that were killed in Vietnam. She said, "O Mama, that's the ABC's." You see what she saw . . . the letter's, and Elizabeth gently told her those were the names of our fallen heroes! She was still, looked at the names, and gently saluted! Wow, when children do these things unexpected it captures your heart. I bet all those soldiers on the "Wall," were looking down at



Millie and smiling. At the bottom were all kinds of things placed in memory: Toy tractors, match-box cars, flowers, and small crosses of which Millie looked at but did not pick up.

So, if there is something we want the children

to someday remember, we must say it, if it can be said; we must do it, if it can be done; we must



sing it, if it can be sung. Because, when children are all grown up, they won't be able to remember the words they never heard, the things they never did, or the songs they never learned. Just remember the time is passing, they years are fleeting, and the children will not be able to remember the words they never heard and the things they never did.

Thank you Elizabeth for the person you are, the love you share and the memories you make with Millie. By-the-way, she is expecting another little girl soon and I know she is in good hands with these parents, although, he was a little disappointed it was not a boy! They are going to call her "Josie." The etymology of this word is "God will Provide a Son!•

Are you an OEF/OIF/OND Veteran? Know what benefits are available to you. Scan the QRC for more info or visit www.oefoif.va.gov/



I-CARE in Action

Photographer Greg Swars Likes to Keep His Veterans in Play

Dr. Frank G. Jordan Jr., FACHE

If you are dedicated to your customers, is it enough to do your job? Not to CVVAMC photographer Greg Swars! To truly honor Veterans, Greg likes to go the extra mile.

If you are a patient with limited mobility and gaming is one of the few leisure time activities that gives you pleasure and that you can still do, having your video game system go on the fritz can be disheartening to say the least, and not being sure where to turn for help can be even more daunting, yet resident Veterans had no need to be concerned since his friend, Greg Swars, was ready to assist.

"We have known each other for a while," Swars said, referring to the Veteran in need, "and we are both gamers, so when he mentioned that his system wasn't working, I immediately offered to help I didn't know what I could get done, but I was determined to take a look."

Originally, Swars intended taking the system to a local gaming store and have the system repaired but on taking a look, he realized that he could make the repair. Having worked in a game store for some years, Greg knew that he could do the work and he was committed to getting his Veteran "back in the game" as quickly as possible.

After a few turns of a screwdriver and a few quick adjustments, Swar's Veteran was indeed back in the game, once again enjoying his favorite leisure time activity. And Greg had a wonderful sense of satisfaction as well.

"As a customer service instructor with my medical center, I teach staff to be problem solvers and keep working on customers' needs until the best solution is found, so knowing that I helped a Veteran get back to what he enjoys doing was very satisfying for me as a VA teammate and as a person," Swars remarked.



VA photographer Greg Swars works to get a Veteran "back in the game"

Swars has also instructed staff in the meaning of I-CARE values, so modelling them has become just the way he does business.

"I like to hear VA folks talking about honoring their Veterans' service and empowering their health, but what I really encourage our teammates to do is to actively look for ways to demonstrate what they mean," Swars said. "Each time we do that, we not only prove what we are saying by our actions, we actually make a difference in our customers' lives, and that's especially satisfying when a Veteran is involved." •

If you know of a CVVAMC teammate who is demonstrating I-CARE in Action, please let us know via email Frank.Jordan@va.gov

Just Saying “No!” to Pain Meds

Tom Cramer, VA Staff Writer

Steve Jobs, the late co-founder of Apple Inc., once made the following observation: “Less is more and usually more effective.”

Increasingly, the Department of Veterans Affairs (VA) appears to be taking the same view when it comes to dispensing pain medications. At the Ralph H. Johnson VA Medical Center in Charleston, for example, a little less than three percent of the total patient population is on chronic opioid therapy. That’s five percent below the national percentage for patients receiving such drugs.

An opioid is a drug such as morphine or oxycodone. They ease pain, but they can also cause physical dependency.

The Right Reason

“Opioids have been around for 3,000 years,” said Dr. Robert Friedman, head of the medical center’s Pain Management Team.

“They’ve been around that long for a reason. They work. But it’s important that we find the right dose, for the right patient, for the right reason. And that’s what our Pain Management Team here in Charleston does.

“We spend a lot of time learning about the patient,” he continued. “Because the fact is, there are a lot of Veterans who’ve been on opioid therapy for a long time who would do just as well, if not better, without opioids — or on a reduced dosage.”

During the last five years, Charleston’s Pain Management Team has helped more than 400 Veterans ease off their pain medications. “A

big part of our success,” Friedman observed, “is getting patients involved in their own care, educating them about pain management and supporting them as they try alternative methods for dealing with chronic pain.

“There’s nothing magical about what we’re doing,” he added. “All we’re doing is taking the time to talk with our patients and learn about them.”

Twinkies and Milkshakes

The pain specialist said his team takes a holistic approach to treating each patient.

“Pain changes your brain,” he observed. “It captures territory associated with mood, emotional regulation and problem-solving. So we don’t just ask the patient how much pain they’re in. “We also ask them things like: ‘How are you sleeping? How is your mood? What is the quality of your life? How are you getting along with people around you? How much are you exercising?

What are you eating?

“What are you eating?” That’s right. Diet and pain are interconnected. “Let’s face it,” Friedman said. “You’re not going to get rid of your pain by eating Twinkies and drinking milkshakes. You are what you eat.”

An Army Veteran, Friedman said he attacks his patients’ pain the same way he would attack an enemy on the battlefield with a team of highly trained professionals.

“We use an interdisciplinary team ap-



Dr. Robert Friedman uses Chinese pulse diagnosis to determine deficiencies or excesses in a patient’s energy in order to guide acupuncture treatment. The technique is well over 2,000 years old.

approach to pain management," he explained. "This team includes the Veteran, doctors, nurse practitioners, pharmacists and mental health professionals, all working together. We establish a personalized health plan with each Veteran to minimize their use of chronic opioids, reduce their pain levels through alternative methods and improve their quality of life."

Plan B

So if you're in chronic pain and they're easing you off opioids, what's Plan B? (It better be good.)

Friedman said his team's holistic approach to pain management involves various complimentary treatments and alternative therapies. "We use multiple tactics to take back your brain from the pain," he said. "If we can, we prefer to use things like mindfulness meditation, yoga, herbals, fish oil, aromatherapy and acupuncture for Veteran patients living with chronic pain."

"When Dr. Friedman puts those four needles in the top of my head, all the pain from my waist down is totally non-existent," said 51-year-old Navy Veteran Steve Pulliam. "I can walk with no pain. It all goes away. It's amazing."

Pulliam had been under the care of Friedman's Pain Management Team due to a crushing injury to his right foot and an impact injury to his left knee — both sustained in separate incidents during his time in the Navy. Then came the cancer diagnosis in August 2013.

"They told me I had a large mass on my pancreas," Pulliam said. "We tried some chemotherapy to shrink it, but it ended up spreading anyway. So we opted to discontinue chemo so I could have some quality of life with the time I have left. They tell me I have anywhere from six to 18 months."

The Sound of the Ocean

Pulliam said he looks forward to his weekly visits to the Charleston VA's Pain Management Team.

"These treatments they're giving me are making a huge difference in the quality of my life that's not attainable by any other means," he said. "It gives you a sense of well-being and eases your mental and physical tensions. It's amazing when they put the needles in ... the gastrointestinal pain goes away, the orthopedic pain goes away." But acupuncture is just one of many tools in the Pain Team's toolbox.

"They use body oils ... lavender and rosemary," Pulliam said. "They put that on your stomach. After a few minutes you can actually taste it. After a few more minutes, you start to feel the effects. The lavender calms the pain in your gut and the rosemary helps with your overall calmness. They also have soft music playing in the background, or something relaxing like the sound of rain falling, or the sound of the ocean.

"I know it all sounds like a bunch of mumbo-jumbo," he added. "But it works. I'm proof of that." Then there's the heat lamp.

"They use an infrared lamp to heat up certain parts of my thoracic area," said the Navy Veteran. "The heat penetrates your skin and reaches the organs inside, warming them up. So you've got the heat, the needles and the oils, all working together. You feel like you're on vacation in the islands, lying on the beach, soaking in the sun. You're not feeling the pain, so you're not thinking about it. It puts you square in the middle of calmness. All your stress, all your worries go away. You're free."

But how long does the vacation in the islands last? The pain stays away for about a day-and-a-half, on average, Pulliam reported.

"If you can take away the hurt for just a little while, it makes all the difference in the world," he said. "It gives you more strength, more power more endurance to keep going. It resets your hope meter." •

Learning for Professionalism

CVVAMC Staffers Benefit from Contemporary Training

Kendra Madison-Harswell, RN

Dedicated to serving America's heroes with excellent patient care, some of my fellow nursing colleagues and I attended the recent Georgia Nurses Association (GNA) Professional Development Conference, *Nurses: Changing the Face & Voice of Leadership*, held at the Kennesaw State University Center. This professionally enriching event offered educational topics including Leadership, Business Development, and Health Care Transformation.

During this conference, we had the privilege to hear an inspirational presentation by Howard L. Myers. A remarkable man with an amazing story, Howard L. Myers lost his eye-



(Left to right) Darlene Mathis, BSN, Kendra Madison-Harswell, BSN, RN-BC, Howard L. Myers, Mindworks Performance Group, Sheara Tillman, RN, BSN, CARN and Rhonda Tillman, BSN

sight in a land mine explosion during the Vietnam War when he was only 20 years old. During his presentation, he described how he transitioned from a blind war Veteran to a multi-million dollar insurance producer for the 10th largest insurance company in the United States.

Mr. Myers and three others now have a company called Mindworks Performance Group.

They teach individuals, organizations, and companies how to live better and more fulfilling lives by using the power of positive thinking. It was indeed an honor for us to meet Mr. Myers, who, as you can see, was delighted to share a photo with VA nurses. •

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